| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | | Application or Docket Number | | | |
|---|--|---|---|-------------|--------------|------------------|--------------|---------------------|------------------------------|----------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL EN' | TITY | OTHER THAN OR SMALL ENTITY | | |
| U.S. NATIONAL STAGE FEES | | | | | | | 7 [| RATE | FEE | 1 | RATE | FEE |
| BASIC FEE . | | | | ****** | | | ┪ ┃ ┃ | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | | · · · · · · | | | | XAM. FEE | | 1 | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | - - s | EARCH FEE | | 1 | SEARCH FEE | FL(X) |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | 1 | X \$ 125 = | | 1 | X \$ 250 = | 1000 |
| TOTAL CHARGEABLE CLAIMS | | | 27minus 20 = * | | | 7 | 1 | X \$ 25 = | | OR. | | 350 |
| INDEPENDENT CLAIMS | | | / minus 3 = * | | | | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| MULTIPLE DEPENDENT CLAIM PRE | | | ESENT | | | | 1 | + \$ 180 = | | OR | | <u> </u> |
| * If | the difference | in column 1 is | less than zero, enter "0" in co | | | olumn 2 | JL | TOTAL | | OR | TOTAL | 1250 |
| V | | | (Column 2) (Column 3) HIGHEST NUMBER PREVIOUSLY PREVIOUSLY | | |] [| SMALL E | NTITY ADDI- TIONAL | OR | OTHER SMALL E | | |
| AMENDMENT | 7-1-1 | AFTER AMENDMENT | | PAID | | | ┥┟ | | FEE | | · | FEE |
| | Total | _ | Minus | | | = | ┨┞ | X \$ 25 = | _ | OR | X \$ 50 = | |
| | Independent | | Minus | *** | | =. | ┨┞ | X \$ 100 = | | OR | X \$ 200 = | - |
| • | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | IJĻ | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | OTAL ADDIT. | | OR | TOTAL ADDÍT. FFF | |
| | | (Column 1) | | (Colur | | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE . | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | . 1 |
| | | | | | | | | OTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |